Filli	n this information t	o identify your cas	se:					
Deb	otor 1	Wallace A. M	oran, III					
	otor 2 use, if filing)	Jennifer A. N	loran		_			
Unit	ed States Bankrup	tcy Court for the:	EASTERN DISTRICT READING DIVISION	OF PENNSYLVANIA,				
Cas (If kno	e number 4:1	9-bk-13586			Che	ck if this is:		
	own)			•		An amende	d filing	
							nt showing postpetition chapter f the following date:	r 13
<u>Of</u>	ficial Form	<u> 106l</u>			1	MM / DD/ Y	YYY	
Sc	chedule I:	Your Inco	me				1	2/15
Par	Describe	e Employment	n the top of any additio	nai pages, write your name	and case nur	nber (if kn	own). Answer every question	۱.
1.	Fill in your emploinformation.	oyment		Debtor 1		Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	than one job,	F	■ Employed		■ Employed		
			Employment status*	☐ Not employed		☐ Not er	mployed	
			Occupation			See Scl	nedule Attached	
	Include part-time, self-employed wor		Employer's name	Tom Orth Rollback & Service	Wrecker			
	Occupation may include student or homemaker, if it applies.		Employer's address					
			How long employed the		nt for Addition	nal Employ	ment Information	
Par	Give De	tails About Mont	hlv Income					
Estir	•	ome as of the dat	•	ou have nothing to report for a	ny line, write \$	0 in the spa	nce. Include your non-filing spoo	use
	u or your non-filing s e, attach a separate			bine the information for all emp	oloyers for that	person on t	the lines below. If you need mo	re
					For De	btor 1	For Debtor 2 or non-filing spouse	
2.			, and commissions (be		\$ 3	3,501.94	\$ 5,864.00	

Official Form 106l Schedule I: Your Income page 1

0.00

\$

3,501.94

0.00

5,864.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Combined monthly income	Debtor :	Maran Mallaco A III X Maran Johnstor A	_	Case	number (if known)	4:19-k	ok-13586
List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions of voluntary voluntar				For		non-f	iling spouse
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and though sports, and the total monthly support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8c. Social Security 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00  8e. Social Security 8e. \$ 0.00 \$ 0.00  9e. S	C	copy line 4 here	4.	\$_	3,501.94	\$	5,864.00
5b. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. So. 0.00 \$ 0.00 5e. Insurance 5e. Insurance 5e. \$ 0.00 \$ 0.00 5. Domostic support obligations 5f. Domostic support obligations 5f. Domostic support obligations 5f. So. 0.00 \$ 0.00 5g. Union dues 5g. \$ 0.00 \$ 0.00 5h. Other deductions. Specify: Damages 5h. Other deductions. Add lines 5a+5b+5c+5d+5	5. <b>L</b> i	ist all payroll deductions:					
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. 8 0.00 \$ 0.00 5d. 0.00 \$ 0.00 5f. Domestic support obligations 5f. \$ 0.00 \$ 0.00 5g. Union dues	5	a. Tax, Medicare, and Social Security deductions	5a.	\$	687.70	\$	974.72
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Insurance 5f. Insurance 5f. Domestic support obligations 5f. Obnestic support obligations 5f. Obnestic support obligations 5f. So. 0.00 5f. Obnestic support settlement. 5f. So. 0.00 5f.	51	b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00
56. Required repayments of retirement fund loans 56. Insurance 56. Insurance 57. Domestic support obligations 57. Domestic support obligations 58. Union dues 59. Union dues 59. S. 0.00 \$ 0.00  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 774.37 \$ 974.72  Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,727.57 \$ 4,889.28  List all other income regularly received:  All other income regularly received:  All the a statement for each property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8a. \$ 0.00 \$ 0.00  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. Unemployment compensation  8d. Social Security  8. Other government assistance that you regularly receive Include cash assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps, theenfits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8pecify:  8f. \$ 0.00 \$ 0.00  8h. Other monthly income. Add lines 8a+8b+8c+8c+8c+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ 0.00  Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules	50	c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
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Sh. Other deductions. Specify: Damages	51	f. Domestic support obligations	5f.	\$	0.00	\$	0.00
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Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.0  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Do you expect an increase or decrease within the year after you file this form?  No.	0.		— "		0.00		0.00
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.0  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Do you expect an increase or decrease within the year after you file this form?  No.	Α	add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	460.49
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.0  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Do you expect an increase or decrease within the year after you file this form?  No.	o. <b>C</b>	Calculate monthly income. Add line 7 + line 9.	10. \$		2.727.57 + \$	5.34	9.77 = \$ 8.077.3
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  11. +\$  0.0  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies  12. Combined monthly income.  Do you expect an increase or decrease within the year after you file this form?  No.	Α	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L			-,-	
Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 8,077.3  Combined monthly income.  Do you expect an increase or decrease within the year after you file this form?  No.	In ot D	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .					
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.  Combined monthly income.  Do you expect an increase or decrease within the year after you file this form?  No.			.16.2			_	
monthly income  Do you expect an increase or decrease within the year after you file this form?  No.							
	_	<b>=</b> * *	?				monthly income
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Official Form 106l Schedule I: Your Income page 2

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Debtor 1	Maran Wallace A III O Maran Januifar A		4.40 bls 40500	
Debtor 2	Moran, Wallace A. III & Moran, Jennifer A.	Case number (if known)	4:19-bk-13586	

## Official Form B 6I Attachment for Additional Employment Information

Spouse	Spouse						
Occupation							
Name of Employer	Abilities in Motion						
How long employed							
Address of Employer							
Spouse							
Occupation							
Name of Employer	New Job						
How long employed							
Address of Employer							

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